

KNOW YOUR BENEFITS.

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Health Care Reform: Enrolling in Health Insurance Marketplaces

An alternative to enrolling in your Employer's Health Plan

You may enroll in the Marketplace during their open enrollment periods. Outside of the open enrollment period you are only able to enroll in the Marketplace if you qualify for special enrollment (loss of coverage, death, marriage, birth). You then have 60 days from your qualifying event to enroll in the Marketplace.

1. **Set up an account.** You'll provide some basic information to get started, like your name, address and email address.
2. **Fill out an online application.** You'll provide information about you and your family, such as income, household size, current health coverage information and more. This will help the Marketplace find options that meet your needs.
3. **Compare your options.** You'll be able to see all the options for you and your family, including private insurance plans and free or low-cost coverage through Medicaid and the Children's Health Insurance Program (CHIP). The Marketplace will tell you if you qualify for lower costs on your monthly premiums and out-of-pocket costs on deductibles, copayments and coinsurance. You'll see details on costs and benefits before you choose a plan.

4. **Enroll.** After you choose a plan, you can enroll online and decide how you pay your premiums to your insurance company. If you or a member of your family qualifies for Medicaid or CHIP, a representative will contact you to enroll.

Marketplace Application Checklist

When you apply for coverage in a Marketplace, you'll need to provide some information about you and your household. It is a good idea to get this information together now so that you are ready when the time comes to enroll. Items required to enroll include:

- Social Security Numbers (or document numbers for legal immigrants)
- Employer and income information for every member of your household who needs coverage (for example, from wage and tax statements such as pay stubs or Forms W-2)
- Policy numbers for any current health insurance plans covering members of your household
- A completed worksheet—called an Employer Coverage Tool—for every job-based plan you or someone in your household is eligible for. You'll need to fill out this form even for coverage you're eligible for but don't enroll in.

Note on Different Marketplaces

Some states run their own Marketplace. In other states, the Marketplace is run by the federal government. Either way, you get the same access to all of your Marketplace coverage options. Be sure to find out who runs your state's Marketplaces for specific instructions on enrollment.

Getting Help

The Marketplace will offer several kinds of assistance to help you apply for coverage and choose a plan that meets your needs, including:

- Online questions and answers go to: <https://www.healthcare.gov/>
- For the online chat go to: <https://www.healthcare.gov/chat/>
- A toll-free call center: <https://www.healthcare.gov/contact-us/>

Help from people in your area

In all states, there will be people trained and certified to help you understand your health coverage options and enroll in a plan. Though all will provide similar kinds of help, they will be known by different names, depending on who provides the service and where they are located:

- Navigators
- Application assistors
- Certified application counselors

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Insurance agents and brokers can also help you with your application and choices. The Marketplace Help Center will assist you in finding the kind of help that works for you. <https://www.healthcare.gov/contact-us/>

Get help filling out an application online

The Marketplace website walks you step-by-step through the online health coverage application. It keeps track of where you are and guides you through to the end. If you have to stop your application and come back later, the Marketplace lets you re-start where you left off.

Useful information on each page explains the questions being asked, how much time each step might take and whether you'll need any forms or other documents. If you want live help while you apply, you can call the toll-free support center or chat with someone online.

Get news and updates by email or text

You can [sign up for Marketplace emails and texts now](#) to learn about key dates, news and updates that will prepare you to enroll.

Health Care Reform: Health Insurance Marketplace FAQs

Can I keep my own doctor?

That depends of the plan or network you are in. Most health insurance plans offered in the Marketplace have networks of hospitals, doctors, specialists, pharmacies and other health care providers. Networks include health care providers that the plan contracts with to take care of the plan's members. Depending on the type of policy you buy, care may be covered only when you get it from a network provider.

When comparing plans in the Marketplace, you will see a link to a list of providers in each plan's network. If staying with your current doctor is important to you, check to see whether he or she is included before choosing a plan.

Am I eligible for coverage in the Marketplace?

Most people will be eligible for health coverage through the Marketplace. To be eligible for health coverage through the Marketplace, you:

- Must live in the United States
- Must be a U.S. citizen or national (or be lawfully present)
- Can't be currently incarcerated

What if I am a U.S. citizen living outside the United States?

U.S. citizens living in a foreign country are not required to get health insurance coverage under the health care reform law. If you're uninsured and living abroad, you don't have to pay the fee that other uninsured U.S. citizens may have to pay.

Generally, health insurance coverage in the Marketplace covers health care provided by doctors, hospitals and medical services within the United States. If you're living abroad, it's important to know this before you consider buying Marketplace insurance.

How can I get lower costs on Marketplace coverage?

When you use the Marketplace you may be able to get lower costs on monthly premiums or out-of-pocket costs, or get free or low-cost coverage. You can save money in the Marketplace in three ways. All of them depend on your income and family size.

- You may be able to lower costs on your monthly premiums when you enroll in a private health insurance plan.
- You may qualify for lower out-of-pocket costs for copayments, coinsurance and deductibles.
- You or your child may get free or low-cost coverage through Medicaid or CHIP.

When you fill out your Marketplace application, you'll find out how much you can save. Most people who apply will qualify for lower costs of some kind.

What range of prices and plans will be available?

Some Marketplace health plans will have lower monthly premiums and may charge you more out-of-pocket costs when you need care. Some will be higher-premium plans that cover more of your costs when you need care. Others will fall in between. All plans will cover the same essential health benefits.

Source: healthcare.gov



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